

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Edward M. Marcico  
District Attorney  
Dauphin Co. Ct House  
South Market Sts.  
Harrisburg, Pa 17101

Article Number (Copy from service label)

7000 0520 002301662473

3 Form 3811, July 1999

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

Debra Rouse

B. Date of Delivery

1-25-01

C. Signature

x Debra Rouse

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

## 3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

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## 1. Article Addressed to:

Mr. Francis Filipi, Deputy Attorney General  
15<sup>th</sup> Floor, Strawberry Square  
Harrisburg, Pa. 17120

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

Francis Filipi

B. Date of Delivery

JAN 26 2001

C. Signature

X Francis Filipi

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

JAN 26 2001

## 3. Service Type

☒ Certified Mail☐ Express Mail☒ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

Article Number (Copy from service label)

000 0520 00230166 2497

3 Form 3811, July 1999

1-00-cv-2183

S.C. Under

Domestic Return Receipt

1-24-01

102595-99-M-1789

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Michael Fisher, Pa. Attorney General  
5<sup>th</sup> Floor, Strawberry Square  
Harrisburg, Pa. 17120

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

Michael Fisher

B. Date of Delivery

JAN 26 2001

C. Signature

x Michael Fisher

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

## 3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label)

7000 0520 002301662480

3 Form 3811, July 1999

1-00-cv-2183

S.C. Under

Domestic Return Receipt

1-24-01

2073

answer

102595-99-M-1789

FILED  
HARRISBURG, PA

FEB 6 2001

MARY E. DIANDREA, CLERK  
Per 9/18 Deputy Clerk

1-00-cv-2183

Show case  
order

1-24-01